FINANCIAL PLANNING WORKSHEET DATE _____

NAME			AGE
PAY GRADE	YRS. IN SVC	TRANSFE	ER DATE
			AGE
			GIRLS
COMMAND ADDRESS	S		
HOME ADDRESS			
WORK TELPHONE		HOME TELEPHONE	
REFERRED BY			
	STATEMEN	Γ OF NET WORTH	
ASSETS (WHAT YOU		LIABILITIES (WHAT)	YOU OWE)
CASH (On Hand)	\$	LOANS PAYABLE	\$
CHECKING ACCT.	\$	CREDIT CARDS	\$
SAVINGS ACCT.	\$	PERSONAL LOANS	\$
CERTIFICATES	\$	AUTO LOANS	\$
OF DEPOSIT		OTHERS (Friends, Relatives,	, etc.)\$
LIFE INSURANCE			
CASH VALUE	\$		
INVESTMENTS			
U.S. BONDS	\$		
MUTUAL FUNDS	\$		
STOCKS	\$		
BONDS	\$		
OTHER (IRA)	\$		
REAL ESTATE (MAR	RKET VALUE)	MORTGAGES (BALAN	NCES DUE)
HOME	\$	HOME	\$
RENTAL	\$	RENTAL PROPERTY	\$
OTHER (VACATION)	\$	OTHER (VACATION)	\$
PERSONAL PROPER	TY		
AUTOMOBILES	\$		
OTHER (FURNITURE, JEWELRY, ETC.)	\$		
TOTAL ASSETS (A)	\$	TOTAL LIABILITIES	(L) \$
NET WORTH (A)	ф	(T) d	ф
NET WORTH = (A)	>	(L) \$	_ = \$

MONTHLY INCOME										
	ACTUAL	PROJECTED	REMARKS							
ENTITLEMENTS										
★ Base Pay (O – /E – , yrs.)										
Basic Allowance for Housing (BAH)										
Basic Allowance for Subsistence (BAS)										
Family Separation Allowance (FSA)										
★ Flight Pay/Diving Pay										
★ Submarine Pay										
★ Other Hazardous Duty Pay										
★ Sea Pay										
★ Hostile Fire Pay										
★ Other Pay										
TOTAL ENTITLEMENTS - Gross Pay (A)										
★ Taxable pay ()										
DEDUCTIONS: (Type and Termination Date)										
"D" ALLOTMENT (Ends)										
"D" ALLOTMENT (Ends)										
"S" ALLOTMENT (Ends)										
"S" ALLOTMENT (Ends)										
"OTHER" ALLOTMENT (Ends)										
"OTHER" ALLOTMENT (Ends)										
Serviceman's Group Life Insurance (SGLI)										
Federal Income Tax (FITW) (M/S)										
Social Security (FICA)										
State Income Tax										
Navy Home Assessment										
Tricare Dental										
Advance Pay										
Overpayments										
TOTAL DEDUCTIONS (B)										
Service Member's Take Home Pay (A – B)										
Service Member's Other Earnings										
Spouse's Earnings (less taxes)										
"D" ALLOTMENT										
"D" ALLOTMENT										
"S" ALLOTMENT										
"S" ALLOTMENT										
"OTHER" ALLOTMENT										
"OTHER" ALLOTMENT										
Serviceman's Group Life Insurance (SGLI)										
Tricare Dental										
Advance Pay										
Overpayments										
Savings/Investment Income										
Child Support/Alimony										
Other										
TOTAL NET MONTHLY INCOME										

	1			
LIVING E	EXPENSES	ACTUAL	PROJECTED	REMARKS
SAVINGS	Emergency Fund			
	Reserve Fund			
	"Goal Getter" Fund			
HOUGHIG	Investments Pont/Mortgogo Poumont			
HOUSING	Rent/Mortgage Payment Taxes			
	Repairs		 	
FOOD	Groceries			
TOOD	Lunches			
	Other			
UTILITIES	Electricity			
	Gas/Oil			
	Water/Sewage			
	Garbage Removal			
	Telephone			
TRANSPORTATION	Gas/Oil			
	Bus			
	Car Pool			
	Repairs Other			
CLOTHES	Laundry/Dry Cleaning			
CLUIRES	Clothing Purchased Yearly ÷ 12		 	
	Other		 	
INSURANCE	Auto			
INSURANCE	Life			
	Health			
	Other			
HEALTH	Prescription Drugs			
	Doctor and Hospital Visits			
	Dentist			
EDUCATION	Tuition			
	Books			
	Fees			
COMEDINATIONS	Other Club Dues			
CONTRIBUTIONS	Church			
	Charity		 	
	Other		1 1	
SUBSCRIPTIONS	Newspaper			
SCESCRII TIONS	Magazines & Books			
	Computer/Internet			
	CDs			
	Cable TV			
	Pest Control			
	Other			
PERSONAL	Beauty Shop			
	Barber Shop		 	
	Cigarettes		 	
	Soda Liquor/Beer		 	
	Other		+ +	
ENTERTAINMENT	Dinner			
ENIEKIAINWENI	Movies			
	Hobbies			
	Sports			
	Other			
DEPENDENT CARE	Child Care			
. •	Child Support			
	Alimony			
	Allowances			
MISCELLANEOUS	Repairs			
	Pet Care			
	Other			
	Other			

INDEBTEDNESS

INSTRUCTIONS: The following information must be listed completely and accurately. If exact figures a	re unknown,
call the creditors and get the information needed. All debts must be listed, including those to friends and	relatives.
Please bring the completed forms with you for your appointment scheduled on	at .

CREDITOR	ADDRESS/PHONE	PURPOSE	MONTHLY PAYMENT	BALANCE	PROJECTED PAYMENT	REMARKS (Priority)	APR
(Acct. No.)							
(Acct. No.)							
(Acct. No.)							
(Acct. No.)							
(Acct. No.)							
(Acct. No.)							
(Acct. No.)							
(Acct. No.)							
(Acct. No.)							
(Acct. No.)							
(Acct. No.)							
(Acct. No.)							
(Acct. No.)							
	RATIO% ENTS ÷ NET INCOME x 100)		TOTAL	TOTAL	TOTAL		AVG

IF ADDITIONAL SPACE IS NEEDED, PLEASE ATTACH AN EXTRA SHEET

	ESTIMATED	ACTUAL	PROJECTED		ESTIMATED	ACTUAL	PROJECTED
TOTAL NET MONTHLY INCOME (Page 2)	\$			AMOUNT LEFT TO PAY DEBTS CARRIED FORWARD	\$		
TOTAL MONTHLY LIVING EXPENSES (Page 3)	\$			DEBTS (Page 4)	\$		
AMOUNT LEFT TO PAY DEBTS (Carry forward to next column)	\$			SURPLUS OR DEFICIT (Projected must =0)	\$		

PROPOSED OPTIONS (Project item and amount) **Decrease Living Expenses Increase Income Decrease Indebtedness SETTING YOUR GOALS** Use the space below to list financial goals you would like to achieve. If you currently owe money on car or furniture loans, or if you have run up the balances on your credit/bank/department store cards, your first goal might be to pay off these debts. Try planning for the next three months and see how things "shape up." Goal Cost **Date Wanted Monthly Savings** (How much you need to save) (Number of months from now) to Reach Goal 1. 2. **3.** 4.

For more information on financial education programs and services, contact your local center. **NFSC NFSC NFSC NFSC** NFSC **NFSC** Little Creek Northwest Norfolk Oceana Dam Neck Yorktown 462-7563 444-2102 421-8770 433-9675 433-7150 887-4606

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Newport News

688-NAVY

*P=Planned Expenses *A=Actual Expenses *P=Planned Expenses *P=Planned Expenses																
-	MONT	MONTH MONTH				MONTH				MONTH						
TOTAL MONTHLY INCOME (Page 2)	\$			\$			\$				\$					
TAKE HOME BY PAYDAY	1st 15th \$			1st 15th \$		1st 15th \$		1st \$			15th \$					
LIVING EXPENSES (Page 3)	*P	*A	P	A	P	A	P	A	P	A	P	A	P	A	P	A
Savings																
Housing																
Food																
Utilities (Telephone)																
Transportation																
Clothes																
Insurance (Auto)																
Health																
Education																
Contributions																
Subscriptions																
Personal																
Entertainment																
Dependent Care																
Miscellaneous																
Creditors (list individually):																
TOTALS:																